

Sign Out Edit View Format Reports Chat/Help

ICANotes  
Behavioral Health EHR

Chart Room

Chart Face

Back

< prev

next >

Show Notes in List

SOS  
610 N. Silver St  
Silver City, NM 88061

575-956-6131  
575-956-6947

Medicaid ID: YIF915103969

Use Note Creation Time  
Clear Time  
Set Date/Time

7/27/2023  
6:43 PM

Armendariz Barela, Eva  
ID: 1000010729151 DOB: 6/19/1972  
Case Management Note (SOS)

History of Risk Factors:  
\*History of Abuse:  
Physical abuse  
\*History of Alcohol or Substance Abuse

Current Risk Factors:  
\*Absent or Weak Support System:  
\*Experiencing Severe Anxiety or Panic  
\*Severe Financial Difficulty  
\*Feelings of Hopelessness, Worthlessness, or Guilt are Present:  
Affect Flat or Blunted  
\*Rapid Shifts in Mood are Occurring

Suicide Risk Assessment:  
Eva denies suicidal ideas or intentions.

Suicide Risk:  
Based on the absence of risk factors, Eva's current risk of suicide is considered Very Low or Absent. There are no suicidal ideation or self-destructive or aggressive thoughts or actions.

Violence Risk:  
Based on the risk factors reviewed, Eva's current risk of violence is considered Absent or Very Low. There is no homicidal ideation or intention. No aggressive ideation, self-injurious intentions, or ideation within the past six months prior to this instance of treatment.

Access to Lethal Means:  
Access to lethal means was discussed with Eva. She denies having access to lethal means at this time.

1 Unit for H0038 Peer Support - UH

Time spent face to face with patient and/or family and coordination of care: 15 min

Session start: 4:30 PM  
Session end: 4:45 PM

T.Y.  
Ryan Dingess, CSW  
Electronically Signed  
By: Ryan Dingess, CSW

Service Location

Audit Log

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